

**EIAA Boys Youth Lacrosse**  
**2019 Spring Session - Registration Form**  
**April 11<sup>th</sup> thru May 23<sup>th</sup>**

**Please submit registration and payment by April 1<sup>st</sup>, 2019**

Date: \_\_\_\_\_  
Players Name: \_\_\_\_\_  
Players Age: \_\_\_\_\_ DOB: \_\_\_\_\_  
Grade: \_\_\_\_\_ School: \_\_\_\_\_  
Parent/Guardian: \_\_\_\_\_  
Primary Phone: \_\_\_\_\_

**No need to complete the form or medical waiver if previously registered.**

**New players please complete the registration form below and medical waiver.**

Alternate Contact: \_\_\_\_\_  
Home Address: \_\_\_\_\_  
Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_  
Work Phone: \_\_\_\_\_ Alt Contact Ph: \_\_\_\_\_  
Email: \_\_\_\_\_

Played Before:  Yes  No    Need Equipment:  Yes  No

Please Check Below If You Own Related Equipment:

- Stick    Goalie Stick    Helmet    Gloves    Arm Pads  
 Shoulder Pads    Goalie Chest Protector

**Uniform Size:**

Youth Jersey:  Small/Medium    Large/X-Large

Youth Shorts:  Small    Medium    Large

**New Player Registration Cost: \$55.00    Returning Player: \$35.00**

**New players must also register on-line with at *USLacrosse*®**

**<https://www.uslacrosse.org/membership>**

**Registration Payment Due April 1<sup>st</sup>, 2019**

**Checks Payable to: EIAA**

**Mail checks to Mike Rizzo, 91 Hillhurst Ln. Roch., NY 14617**

**Please return registration and the medical waiver to: [marizzo1954@gmail.com](mailto:marizzo1954@gmail.com)**